



2172
41

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	09/873,730
		Filing Date	June 2, 2001
		First Named Inventor	Gerald Neufeld
		Art Unit	2172
		Examiner Name	Hung Q. Pham
Total Number of Pages in This Submission	19	Attorney Docket Number	4906P021

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>	
			<input type="checkbox"/> Drawing(s)
			<input type="checkbox"/> Licensing-related Papers
			<input type="checkbox"/> Petition
			<input type="checkbox"/> Petition to Convert a Provisional Application
			<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address
			<input type="checkbox"/> Terminal Disclaimer
			<input type="checkbox"/> Request for Refund
			<input type="checkbox"/> CD, Number of CD(s)
			<input type="checkbox"/> After Allowance Communication to Group

RECEIVED

JUL 02 2004

Technology Center 2100

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Jonathan S. Miller, Reg. No. 48,534 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	June 25, 2004

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Non Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.			
Typed or printed name	Lillian E. Rodriguez		
Signature		Date	June 25, 2004



~~FREE~~ TRANSMITTAL
for FY 2004

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$ 0.00)

Complete if Known	
Application Number	09/873,730
Filing Date	June 2, 2001
First Named Inventor	Gerald Neufeld
Examiner Name	Hung Q. Pham
Art Unit	2172
Attorney Docket No.	4906P021

METHOD OF PAYMENT *(check all that apply)*

<input type="checkbox"/> Check	<input type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input checked="" type="checkbox"/> None
<input checked="" type="checkbox"/> Deposit Account				

Deposit
Account
Number **02-2666**

The Commissioner is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments

Charge any additional fee(s) or underpayment of fees as required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEES CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity			Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Description	
1001	770	2001	385	Utility filing fee	
1002	340	2002	170	Design filing fee	
1003	530	2003	265	Plant filing fee	
1004	770	2004	385	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	

2. EXTRA CLAIM FEES

Total Claims	51	53 ^{**}	= 0	X 18.00	= \$0.00
Independent Claims	10	10 ^{**}	= 0	X 86.00	= \$0.00
Multiple Dependent					

Large Entity		Small Entity		<u>Fee Description</u>
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	86	2201	43	Independent claims in excess of 3
1203	290	2203	145	Multiple Dependent claim, if not paid
1204	86	2204	43	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

***or number previously paid, if greater. For Reissues, see below.*

SUBTOTAL (3) (\$)

SUBMITTED BY

Complete (if applicable)

Submitted by		Complete (if applicable)		
Name (Print/Type)	Jonathan S. Miller	Registration No. (Attorney/Agent)	48,534	Telephone
Signature			Date	06/25/04

Based on PTO/SB/17 (10-03) as modified by Blakely, Solokoff, Taylor & Zafman (wir) 02/10/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450